

Message Text

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PAGE 01 PARAMA 00515 301523Z

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ACTION ARA-10

INFO OCT-01 ISO-00 OES-02 AID-05 HEW-02 COME-00 IGA-01

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FM AMCONSUL PARAMARIBO

TO SECSTATE WASHDC 1828

UNCLAS PARAMARIBO 515

E.O. 11652: N/A

TAGS: SPOP, NS

SUBJECT: IPPF 1975 PROGRAM: SURINAM

REF: STATE 229273

FOLLOWING ANSWERS ARE KEYED SERIALY TO QUESTIONS IN REFTEL:

B (1) - LOCAL IPPF AFFILIATE, STICHTING LOBI (SL), RECEIVED DOLS 19,000 FROM IPPF THIS YEAR AND EXPECTS DOLS 25,000 FROM IPPF FOR ITS 1975 PROGRAM. IPPF ACCOUNTS FOR NEARLY ALL OF SL'S BUDGET. SUPPLIES ARE ADEQUATE TO MEET CURRENT AND EXPECTED DEMAND, ALTHOUGH MANY FAMILIES ARE NOT BEING REACHED BY SL.

B (2) - THERE IS NO CHARGE FOR INDIVIDUAL CLINICAL VISITS OR PILLS DISPENSED BY SL. REGULAR PARTICIPANTS IN PROGRAM PAY EQUIVALENT OF US DOLS 7.12 ANNUAL FEE, IF THEY ARE ABLE.

B (3) - PILLS ARE DISPENSED IN BLUE LADY PACKAGE. SL WORKERS DO NOT BELIEVE MEDICAL WARNING IS BARRIER TO ACCEPTANCE.

B (4) - NO.

B (5) - PARAMEDICALS ARE BEING USED TO DISPENSE PILLS BUT DOCTORS ONLY MAY INSERT IUD'S.

B (6) - DISTRIBUTION IS BASED ON SL CLINICS. THERE ARE NO UNCLASSIFIED

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PAGE 02 PARAMA 00515 301523Z

PLANS FOR COMMUNITY BASED DISTRIBUTION.

B (7) - SL REPORTS THAT 4,900 WOMEN HAVE REGISTERED WITH IT SINCE PROGRAM STARTED IN 1969. OF THESE, ABOUT 3,000 ATTEND CLINIC REGULARLY. IN ALL, THERE WERE 11,000 CLINIC VISITS IN 1973. THERE IS ONE CLINIC IN PARAMARIBO, TRYING TO SERVE POPULATION OF APPROXIMATELY QUARTER MILLION, AND ONE EACH IN ALBINA AND NIEUW AMSTERDAM. WOMEN LIVING ELSEWHERE IN SURINAM MUST TRAVEL TO THESE CENTERS FOR FAMILY PLANNING ASSISTANCE. PROGRAM OBVIOUSLY IS REACHING ONLY SMALL PROPORTION OF TOTAL POPULATION (384,900 IN 1971, EXCLUDING SURINAMESE WHO HAVE MIGRATED TO THE NETHERLANDS), ALTHOUGH POPULARITY OF FAMILY PLANNING SEEMS TO BE INCREASING AMONG YOUNGER PEOPLE, WITH OR WITHOUT HELP OF SL.

C (1) - SMALL TOTAL POPULATION AND POSSIBILITY OF OUT-MIGRATION HAVE MADE FAMILY PLANNING SEEM LESS THAN URGENT IN SURINAM. SUBJECT ALSO AROUSES ETHNIC RIVALRIES IN COUNTRY WHERE MAIN POLITICAL PARTIES FOLLOW COMMUNAL (HINDUSTANI, CREOLE, JAVANESE) LINES. PROBABLY AS RESULT, GOVERNMENT HAS THUS FAR AVOIDED SIGNIFICANT COMMITMENT TO FAMILY PLANNING. IT IS UNLIKELY THAT GOS CONTEMPLATES TAKE-OVER OR MAJOR CONTRIBUTION TO SL'S ACTIVITIES IN FORESEEABLE FUTURE. IN CIRCUMSTANCES, SL WOULD HAVE TO BEAR BRUNT OF EXPANDING NON-CLINICAL SERVICES, AND COULD ONLY DO SO WITH INCREASED IPPF SUPPORT.

C (2) - DEARTH OF TRAINED PERSONNEL AND MONEY LIMITS SL'S ABILITY TO ORGANIZE COMMUNITY ACTION.

C (3) - SEE (1) ABOVE.
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